



State of Utah Department of Environmental Quality
Division of Solid and Hazardous
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Web Page: <http://www.usedoil.utah.gov/UsedOilSection.htm>
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Used Oil Off-Specification Burner Annual Report For Facilities in Utah

For: January 1 – December 31, 2010

Annual Reports must be submitted to the address at the top of this page by March 1, 2011.

Please call if you have any questions about how to complete this report.

I. General Used Oil Permit Information Section

A. Company Name	B. Utah Used Oil Permit Number: (for example UOP-0123)
C. Company Mailing Address	D. Permitted <u>Facility's Physical Address</u>
E. Contact Name and Title for Used Oil Permit	F. Federal EPA ID Number: (for example UTR123456789)
G. Contact's Phone Number	H. Name of Person Completing Form (if different than person listed in box E) Phone Number E-mail Address
I. Contact's Fax Number	
J. Contact's E-mail Address	

II. Certification Section

The Company owner or his/her designated representative must sign this form.

I certify under penalty of law this report and all attachments were prepared by me or under my direction or supervision. The information submitted is to the best of my knowledge and belief, true, accurate and complete. I am aware there are significant penalties, including the possibility of a fine and imprisonment for knowing violations, for submitting false information.

Name _____ Title _____

Signature _____ Date _____

Continue to next page

Gallons

IV. General Liability Insurance Information Section

Submit a current **ACORD** form or equivalent (available from insurance broker) showing General Liability Insurance Coverage

OR

If you do not submit a current **ACORD**, the following information must be submitted.

A. Name of Insurance Company on Policy	B. Name of Insurance Broker/Agent
C. Physical Address of Insurance Company	D. Phone Number of Insurance Broker/Agent
E. Coverage Types and Amounts	
F. Policy Number	G. Effective Date
H. Policy Date	I. Expiration Date

Continue to next page

V. Environmental Pollution Liability Insurance for Third-Party Damages Section	
Submit a current ACORD form or equivalent (available from insurance broker) showing Third-Party Damages Coverage <div style="text-align: center; padding: 5px;">OR</div> If you do not submit a current ACORD , the following information must be submitted.	
A. Name of Insurance Company on Policy	B. Name of Insurance Broker/Agent
C. Physical Address of Insurance Company	D. Phone Number of Insurance Broker/Agent
E. Coverage Types and Amounts	
F. Policy Number	G. Effective Date
H. Policy Date	I. Expiration Date
VI. Financial Assurance Information for Cleanup and Closure Cost Estimates Section	
A. Type of financial assurance mechanism your business is using for Cleanup and Closure Costs (check only one): <input type="checkbox"/> Letter of Credit* <input type="checkbox"/> Payment Bond* <input type="checkbox"/> Insurance Policy* <input type="checkbox"/> Trust Fund * These mechanisms also require a Standby Trust Agreement Financial Instrument Control No. (unique identifying number of document): _____ Dollar amount of financial assurance provided by this financial instrument: \$ _____ <div style="text-align: right; margin-right: 50px;">Instrument Value</div>	
B. Closure Cost Estimate Adjustment: (Complete either Method 1 or Method 2 below then complete Section C) <div style="padding-left: 20px;"> Method 1. Inflation Factor Adjustment <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> \$ _____ Enter Last Year's Total Closure Cost Estimate <small>(Find this on last year's report under "Total Closure Cost Estimate." Call the Used Oil Program if you are not sure what number to use)</small> </div> <div style="text-align: center;"> x 1.01502 Inflation Factor </div> <div style="text-align: center;"> = \$ _____ Total Closure Cost Estimate for this year </div> </div> </div> <div style="padding-left: 20px; margin-top: 20px;"> OR Method 2. Recalculated Engineering Closure Cost Estimate Note: This method requires detailed information to be submitted and approved by the Executive Secretary of the Solid and Hazardous Waste Control Board. Also, any change in the facility or process requires a permit modification to be submitted to the Executive Secretary for review and approval. <div style="text-align: right; margin-right: 50px;"> RECALCULATED ENGINEERING CLOSURE COST ESTIMATE: \$ _____ Total Closure Cost Estimate </div> </div>	
C. Financial Assurance Closure Cost Estimate Summary	
1. Enter Instrument Value (From Section A above)	
2. Enter Total Closure Cost Estimate (From Section B above)	
3. If line C1 (Instrument Value) is less than line C2 (Total Closure Cost Estimate) the Instrument Value must be increased to equal or exceed the newly calculated Total Closure Cost Estimate. <div style="text-align: center; padding: 5px;"> A written notice from the issuer of the financial mechanism documenting this increase must be included with this Annual Report. </div>	
4. If line C1 (Instrument Value) is equal to or more than line C2 (Total Closure Cost Estimate) the Instrument Value is adequate for this year and no changes are needed.	